

Notice of Exempt Offering of Securities

U.S. Securities and Exchange Commission

Washington, DC 20549

(See instructions beginning on page 5) Intentional misstatements or omissions of fact constitute federal criminal violations. See 18 U.S.C. 1001.

OMB Number: 3235-0076

Expires: September 30, 2008

Estimated average burden hours per response: 4.00

Item 1. Issuer's Identity			
Name of Issuer	Previous Name(s)	None —	Entity Type (Select one)
Odessa I, LP	Previous Name(s)	X None —	Corporation
Jurisdiction of Incorporation/Organizatio	on		Limited Partnership
Delaware			Limited Liability Company
Detattate			General Partnership
Year of Incorporation/Organization		08060458	Business Trust
(Select one) Over Five Years Ago	e Years \	Yet to Be Formed	Other (Specify)
(specify ye		ret to be ronned	
(If more than one issuer is filing this notice.	check this box and ident	ify additional issuer(s) by	attaching Items 1 and 2 Continuation Page(s).)
Item 2. Principal Place of Busines	s and Contact Informa	ation	attaching Items 1 and 2 Continuation (s).)
Street Address 1	Julia College IIII of III	Street Address 2	OCT 0 7 2008
160 Greentree Drive, Suite 101	· · · ·		
City	State/Province/Country	ZIP/Postal Code	Phone THOMSON REUTERS
Dover	Delaware	19904	626 797 3339
Item 3. Related Persons			ACALILA No
Last Name	First Name		Middle Name
Odessa Capital Management LLC		<u>.</u>	SEC Mail Processing
Street Address 1	·	Street Address 2	Section
1293 North Chester Avenue			
City	State/Province/Country	ZIP/Postal Code	SEP 2 6 2008
Pasadena	Ca	91104	
Relationship(s): Executive Officer	☐ Director ☐ Promote	r	₩ <u>eshington, DC 1001</u>
Clarification of Response (if Necessary)	Conoral Partner		100
		ons by checking this box	$\overline{\mathbf{X}}$ and attaching Item 3 Continuation Page(s).
Item 4. Industry Group (Select			
 Agriculture Banking and Financial Services 		ss Services	Construction
Commercial Banking	<u> </u>	ectric Utilities	REITS & Finance Residential
Insurance	Ŏ En	ergy Conservation	Other Real Estate
Investing	Õ 6	al Mining	
Investment Banking	Ŭ En	vironmental Services	Retailing
 Pooled Investment Fund 	O oi	l & Gas	RestaurantsTechnology
If selecting this industry group, also se		her Energy	Computers
type below and answer the question I	below: Health	Care	Telecommunications
Hedge Fund	Ž	otechnology	Other Technology
Private Equity Fund	<u> </u>	alth Insurance	
Venture Capital Fund Other Investment Fund	<u>_</u>	spitals & Physcians	Travel Airlines & Airports
Is the issuer registered as an inv		armaceuticals	Codging & Conventions
company under the investment	Company	her Health Care	Tourism & Travel Services
Act of 1940? Yes N	_	acturing	Other Travel
Other Banking & Financial Services	Real Es	tate Immercial	Other

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Item 5. Issuer Size (Select one)

Revenue Range (for issuer not specifying "hedge" or "other investment" fund in Item 4 above)	Aggregate Net Asset Value Range (for issuer specifying "hedge" or "other investment" fund in Item 4 above)
No Revenues	OR No Aggregate Net Asset Value
\$1 - \$1,000,000	\$1 - \$5,000,000
\$1,000,001 - \$5,000,000	\$5,000,001 - \$25,000,000
\$5,000,001 - \$25,000,000	\$25,000,001 - \$50,000,000
\$25,000,001 - \$100,000,000	\$50,000,001 - \$100,000,000
Over \$100,000,000	Over \$100,000,000
Decline to Disclose	Decline to Disclose
Not Applicable	O Not Applicable
Item 6. Federal Exemptions and Exclusions Cla	aimed (Select all that apply)
ir	nvestment Company Act Section 3(c)
Rule 504(b)(1) (not (i), (ii) or (iii))	
Rule 504(b)(1)(i)	Section 3(c)(2) Section 3(c)(10)
Rule 504(b)(1)(ii)	Section 3(c)(3) Section 3(c)(11)
Rule 504(b)(1)(iii)	Section 3(c)(4) Section 3(c)(12)
Rule 505	Section 3(c)(5) Section 3(c)(13)
☐ Rule 506	
Securities Act Section 4(6)	Section 3(c)(14)
Item 7. Type of Filing	
New Notice OR	nt
Date of First Sale in this Offering:	OR First Sale Yet to Occur
Date of First Sale in this Offering: Item 8. Duration of Offering	OR First Sale Yet to Occur
Item 8. Duration of Offering Does the issuer intend this offering to last more than	n one year? X Yes No
Item 8. Duration of Offering Does the issuer intend this offering to last more than	
Item 8. Duration of Offering Does the issuer intend this offering to last more than	n one year? X Yes No
Item 8. Duration of Offering Does the issuer intend this offering to last more than Item 9. Type(s) of Securities Offered (Select	n one year? X Yes No all that apply)
Does the issuer intend this offering to last more than ltem 9. Type(s) of Securities Offered (Select Equity Debt	n one year?
Item 8. Duration of Offering Does the issuer intend this offering to last more than Item 9. Type(s) of Securities Offered (Select Equity	n one year?
Does the issuer intend this offering to last more than Item 9. Type(s) of Securities Offered (Select Equity Debt Option, Warrant or Other Right to Acquire	none year?
Does the issuer intend this offering to last more than Item 9. Type(s) of Securities Offered (Select Equity Debt Option, Warrant or Other Right to Acquire Another Security Security to be Acquired Upon Exercise of Option,	none year?
Does the issuer intend this offering to last more than Item 9. Type(s) of Securities Offered (Select	rone year?
Does the issuer intend this offering to last more than Item 9. Type(s) of Securities Offered (Select Equity Debt Option, Warrant or Other Right to Acquire Another Security Security to be Acquired Upon Exercise of Option, Warrant or Other Right to Acquire Security Item 10. Business Combination Transaction	rone year?
Does the issuer intend this offering to last more than Item 9. Type(s) of Securities Offered (Select Equity Debt Option, Warrant or Other Right to Acquire Another Security Security to be Acquired Upon Exercise of Option, Warrant or Other Right to Acquire Security Item 10. Business Combination Transaction Is this offering being made in connection with a busin transaction, such as a merger, acquisition or exchange offer	rone year?
Does the issuer intend this offering to last more than Item 9. Type(s) of Securities Offered (Select Equity Debt Option, Warrant or Other Right to Acquire Another Security Security to be Acquired Upon Exercise of Option, Warrant or Other Right to Acquire Security Item 10. Business Combination Transaction Is this offering being made in connection with a busin transaction, such as a merger, acquisition or exchange offer	rone year?

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Item 11. Minimum Investment						
Minimum investment accepted from any outside invest	tor \$ 250,000		<u></u>			
Item 12. Sales Compensation				· · · · · · · · · · · · · · · · · · ·		
Recipient	Recipient	: CRD Number				
N/A			_		No CRD Num	ber
(Associated) Broker or Dealer None	(Associat	ed) Broker or Dea	ler CRD Nu	mber		
		···			lo CRD Num	ber
Street Address 1	Street Add	lress 2				
City State	e/Province/Country	ZIP/Postal Cod	de			
States of Solicitation X All States		nie (Tinc			1 -	110
		DE DC MD MA	☐ FL ☐ MI	GA []HI []MS [] ID] MO
		NC ND	ОН	□ ок □	OR	PA
RI SC SD TN TX	ਯ □ਾ ਯ □	VA 🗌 WA	□ wv	wı _[] PR
(Identify additional person(s) being paid o	ompensation by chec	king this box	and attach	ing Item 12 C	ontinuation	Page(s)
Item 13. Offering and Sales Amounts						
(a) Total Offering Amount	· · · · · · · · · · · · · · · · · · ·	"-"	OR	X Indefin	uita	
•			l OK	[Z] Indelii	nte	
(b) Total Amount Gold	····					
(c) Total Remaining to be Sold (Subtract (a) from (b))			OR	☐ Indefir	nite	
Clarification of Response (if Necessary)						
Item 14. Investors						
Check this box if securities in the offering have been of	or may be sold to pers	ons who do not c	qualify as ac	credited inve	stors, and en	ter the
number of such non-accredited investors who already ha	ave invested in the offe	ering:				
		•		•		
Enter the total number of investors who already have inv	vested in the offering:	0				
Item 15. Sales Commissions and Finders' F	ees Expenses					
	<u> </u>					
Provide separately the amounts of sales commissions and check the box next to the amount.	d finders' fees expense	es, it any. It an ar	nount is no	t known, pro	vide an estin	nate and
	Sales Comm	issions \$ 0			Estimate	
		rs' Fees \$ 0			Estimate	
Clarification of Response (if Necessary)	Finder	s rees \$ [0				

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em 16. Use of Proceeds		
ovide the amount of the gross proceeds of the offering that has been or sed for payments to any of the persons required to be named as rectors or promoters in response to Item 3 above. If the amount is unlitimate and check the box next to the amount.	executive officers, \$ [N/A	Estimate
. Clarification of Response (if Necessary)		
ignature and Submission		
Please verify the information you have entered and review the	Terms of Submission below before sign	ing and submitting this notice.
Terms of Submission. In Submitting this notice, each in	dentified issuer is:	
the State in which the issuer maintains its principal place of b process, and agreeing that these persons may accept service such service may be made by registered or certified mail, in an against the issuer in any place subject to the jurisdiction of the activity in connection with the offering of securities that is the provisions of: (i) the Securities Act of 1933, the Securities Exch Company Act of 1940, or the Investment Advisers Act of 1940 State in which the issuer maintains its principal place of busin Certifying that, if the issuer is claiming a Rule 505 exthe reasons stated in Rule 505(b)(2)(iii).	on its behalf, of any notice, process or p ny Federal or state action, administrative e United States, if the action, proceeding e subject of this notice, and (b) is founde lange Act of 1934, the Trust Indenture A , or any rule or regulation under any of t ess or any State in which this notice is fi	leading, and further agreeing that e proceeding, or arbitration brought g or arbitration (a) arises out of any ed, directly or indirectly, upon the ct of 1939, the Investment these statutes; or (ii) the laws of the led.
* This undertaking does not affect any limits Section 102(a) of the Na 110 Stat. 3416 (Oct. 11, 1996)) imposes on the ability of States to requ "covered securities" for purposes of NSMIA, whether in all instances of routinely require offering materials under this undertaking or otherw so under NSMIA's preservation of their anti-fraud authority.	uire information. As a result, if the securities to or due to the nature of the offering that is the	hat are the subject of this Form D are subject of this Form D, States cannot
Each identified issuer has read this notice, knows the contents undersigned duly authorized person. (Check this box an in Item 1 above but not represented by signer below.)	s to be true, and has duly caused this no d attach Signature Continuation Pages f	tice to be signed on its behalf by the for signatures of issuers identified
Issuer(s)	Name of Signer	
Odessa I, LP	Hannah M. Terhune, Esquire	
Signature	Title	
Harmah M. Terhul	Attorney for Odessa I, LP	
Number of continuation pages attached:		Date
ramoci oi continuation pages attached.		l09/19/2008

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.



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Item 3 Continuation Page

Item 3. Related Persons (Continued)

Last Name	First Name		Middle Name
Valluri	Siddhartha		
Street Address 1		Street Address 2	
1293 North Chester Avenue			
City	State/Province/Country	ZIP/Postal Code	
Pasadena	Ca	91104	
Relationship(s): X Executive Officer	☐ Director ☒ Promoter		
Clarification of Response (if Necessary)			
Last Name	First Name		Middle Name
Street Address 1		Street Address 2	
City	State/Province/Country	ZIP/Postal Code	
Relationship(s): Executive Officer	Director Promoter		
Clarification of Response (if Necessary)			
Claimeation of Nesponse (in Necessary)			
· 			
Last Name	First Name		Middle Name
		Carana Adduna 2	
Street Address 1		Street Address 2	
Cia.	State/Province/Country	710/Destal Code	
City	State/Province/Country	ZIP/Postal Code	
Relationship(s): Executive Officer	Director Promoter		
	Director Promoter		
Relationship(s): Executive Officer Clarification of Response (if Necessary)	Director Promoter		
	Director Promoter First Name		Middle Name
Clarification of Response (if Necessary)			Middle Name
Clarification of Response (if Necessary) Last Name		Street Address 2	Middle Name
Clarification of Response (if Necessary) Last Name		Street Address 2	Middle Name
Clarification of Response (if Necessary) Last Name Street Address 1		Street Address 2 ZIP/Postal Code	Middle Name
Clarification of Response (if Necessary)	First Name		Middle Name
Clarification of Response (if Necessary) Last Name Street Address 1	First Name		Middle Name
Clarification of Response (if Necessary) Last Name Street Address 1 City	First Name State/Province/Country		Middle Name END